

DOCKET FILE COPY ORIGINAL

Kenedy Public Library
303 W. Main St.
Kenedy, Texas 78119
Bus. # 830-583-3313
Fax # 830-583-3270
librarian@kenedy.lib.tx.us

RECEIVED & INSPECTED
FEB 28 2002
FCC - MAILROOM

February 13, 2002

Re: Form 471 Application Number 263244
Funding Year 4: 07/01/2001 – 06/30/2002
Billed Entity Number: 197702

2nd Letter of Appeal
Re: CC Docket Nos. 96-45 and 97-21

Dear Sir or Madam:

After receiving your letter of "Administrator's Decision on Appeal", I was shocked to read that the library was "Approved, but denied for funding". However, when I read the explanation that was given for the denial of funding I realize that there was probably a mistake.

I then went back to my forms to make sure that the information that was sent was correct. Due to the reason, that your letter stated that I had not complied "with the competitive bidding requirement of Form 470 to be posted on the website for the 28 days prior to signing/renewing a contract for services, or entering into an agreement for new services."

After reviewing the forms I did find that Form 471 was not included in my packet that I sent to you when I mailed out my first letter of appeal. Your response to my appeal indicated that I did not wait the 28 days posted period prior to signing/renewing the contract. However, after thoroughly looking and reviewing my contract I did find that I signed the contract on an appropriate date. It had not been sign prior to the contract date. The date that it was signed was on January 16, 2001, where as your letter state that it had to been signed after January 8, 2001. By signing after the contract date proves that the library did comply with the requirements of SLD.

No. of Copies rec'd 0
List ABCDE

So once again I'm pleading, please reconsider your decision in funding our library for discounts. As mention before the library is providing many of our patrons with the accessibility of using the Internet. Our stats have increasingly grown since the library has made this possible. Patrons are excited of having the advantage of coming to the library and using this service. However, paying for the service has honestly taken great amount of money out from our budget. Please review our application showing that the library did comply with the requirements of SLD.

I would only like to take the time in thanking you for assisting libraries with funding to provide Internet service to their community. There are not enough words to describe our appreciation, when SLD assists our libraries.

Sincerely,

A handwritten signature in cursive script that reads "Sylvia Pena". The signature is written in dark ink and is positioned above the printed name.

Sylvia Pena

Kenedy Public Library
Library Director: Sylvia Pena
303 W. Main St.
Kenedy, Texas 78119
Bus. # 830-583-3313
Fax # 830-583-3270
librarian@kenedy.lib.tx.us

August 10, 2001

Re: Form 471 Application Number: 263244
Funding Year 4: 07/01/2001 – 06/30/2002
Billed Entity Number: 197702

Dear Sirs:

This is a letter to appeal the **Funding Commitment Decision Letter**. This letter informed us that the funding commitment disapproved funding for:

FRN 692387
SPIN 143004611
Contract # KPL 1999

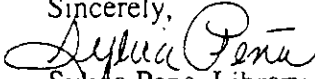
The funding commitment decision explanation was: **The FRN references a Form 470, which has not been certified.**

After reviewing my files, I found a copy of the Form 470, which included the signature page, as well as my certified mail receipt dated Dec. 11, 2000. However, I was unable to locate the Return Receipt, which should have been sent to me upon the SLD receiving it.

I have enclosed a copy of Form 470, which also includes a copy of the signature page. I've also taken the liberty of resigning the signature page in blue ink. A copy of the certified mail receipt is also enclosed.

I am requesting that SLD Funding Committee/Board re-evaluate the decision for the Kenedy Public Library Request for Funds, as we have shown proof that the SLD Form 470 signature page was signed and mailed.

If you have any questions please do not hesitate to call me @ 830-583-3313.

Sincerely,

Sylvia Pena, Library Director

CC: Form 470 Signature Page
CC: Certified Mail Receipt
CC: Funding Commitment Decision Letter



Universal Service Administrative Company
Schools & Libraries Division

Administrator's Decision on Appeal - Funding Year 2001-2002

January 21, 2002

Sylvia Pena, Library Director
Kenedy Public Library
303 W. Main St.
Kenedy, TX 78119

Re: Billed Entity Number: 197702
471 Application Number: 263244
Funding Request Number(s): 692387
Your Correspondence Dated: August 10, 2001

After thorough review and investigation of all relevant facts, the Schools and Libraries Division ("SLD") of the Universal Service Administrative Company ("USAC") has made its decision in regard to your appeal of SLD's Year Four Funding Commitment Decision for the Application Number indicated above. This letter explains the basis of SLD's decision. The date of this letter begins the 30-day time period for appealing this decision to the Federal Communications Commission ("FCC"). If your letter of appeal included more than one Application Number, please note that for each application for which an appeal is submitted, a separate letter is sent.

Funding Request Number: 692387
Decision on Appeal: **Approved, but denied for funding**
Explanation:

- Your appeal has brought forward persuasive information that your appeal should be approved. Unfortunately, the **SLD will be unable to provide discounts for your request** for the reasons cited below.
- The documentation that you provided during the review of your application, your fax, dated July 25, 2001, stated that the Form 470 # 841140000327110 is the establishing Form 470 that Kenedy Public Library filed seeking bids on the service they are requesting. The establishing Form 470 shows that the earliest date upon which you could sign, renew or enter into a contract/ an agreement (your Allowable Contract Date) was January 8, 2001. You have not claimed that this Form 471 relates to a

different Form 470 other than the Form 470 indicated above. Consequently, SLD denies your appeal because your application did not comply with the competitive bidding requirement that your Form 470 be posted on the website for 28 days prior to your signing/renewing a contract for services or entering into an agreement for new services.

- FCC rules require that except under limited circumstances, all Forms 470 received be posted on the website for 28 days, and that applicants carefully consider all bids received before selecting a vendor, entering into an agreement or signing a contract, and signing and submitting a Form 471. *See* 47 C.F.R. §§ 54.504; 54.511(a), (c). FCC rules further require that the Administrator send the applicant a confirmation when the Form 470 has been posted, and inform the applicant of the date after which the applicant may sign a contract with the vendor it selects. *See* 47 C.F.R. § 54.504(b)(4). These competitive bidding requirements help ensure that applicants receive the lowest pre-discount price from vendors. *See Federal-State Joint Board on Universal Service*, CC Docket No. 96-45, Order on Reconsideration, 12 FCC Rcd 10095, 10098 ¶ 9 (1997).

If you believe there is a basis for further examination of your application, you may file an appeal with the Federal Communications Commission (FCC) via United States Postal Service: FCC, Office of the Secretary, 445-12th Street SW, Washington, DC 20554. If you are submitting your appeal to the FCC by other than United States Postal Service, check the SLD web site for more information. Please reference CC Docket Nos. 96-45 and 97-21 on the first page of your appeal. **The FCC must RECEIVE your appeal WITHIN 60 DAYS OF THE ABOVE DATE ON THIS LETTER for your appeal to be filed in a timely fashion.** Further information and new options for filing an appeal directly with the FCC can be found in the "Appeals Procedure" posted in the Reference Area of the SLD web site, www.sl.universalservice.org.

We thank you for your continued support, patience, and cooperation during the appeal process.

Schools and Libraries Division
Universal Service Administrative Company

Schools and Libraries Universal Service Services Ordered and Certification Form 471

Estimated Average Burden Hours Per Response: 4 hours

This form asks schools and libraries to list the eligible telecommunications-related services they have ordered and estimate the annual charges for them so that the Fund Administrator can set aside sufficient support to reimburse providers for services.

Please read instructions before beginning this application. (See www.sl.universalservice.org for filing this form online)

Applicant's Form Identifier: 003
(Create your own code to identify THIS Form 471)

Block 1: Billed Entity Information

(The "Billed Entity" is the entity paying the bills for the services listed on this form.)

1	Name of Billed Entity (30 characters max.)	Kenedy Public Library		
2	Funding Year: July 1, <u>2001</u> through June 30, <u>2002</u>	3	Entity Number (up to 10 digits)	197702
4a	Street Address, P.O. Box, or Route Number	303 W. Main St.		
	City	State	Zip Code	
	Kenedy	Texas	78119	-
b	Telephone Number (10 digits + ext.)	(830) 583 3313 ext. -		
c	Fax Number (10 digits)	(830) 583 3270		
d	E-mail Address (50 characters max.)	librarian@kenedy.lib.tx.us		
5	Type of Application			
	<input type="checkbox"/> School	(public or non-public school)		
	<input type="checkbox"/> School District	(LEA; public or non-public (e.g., diocesan) local district representing multiple schools)		
	<input checked="" type="checkbox"/> Library	(library (i.e. outlet/branch, system))		
	<input type="checkbox"/> Consortium	<input type="checkbox"/> Check here if any members of this consortium are ineligible non-governmental entities.		
6a	Contact Person's Name	Sylvia Pena		
	First, fill in every item of the Contact Person's information below that is different from Item 4, above.			
	Then check the box next to the preferred mode of contact. (At least one box MUST be checked.)			
b	<input type="checkbox"/> Street Address, P.O. Box, or Route Number	303 W. Main St.		
	City	State	Zip Code	
	Kenedy	Texas	78119	-
c	<input checked="" type="checkbox"/> Telephone Number (10 digits + ext.)	(830) 583 3313 ext. -		
d	<input type="checkbox"/> Fax Number (10 digits)	(830) 583 3270		
e	<input type="checkbox"/> E-mail Address (50 characters max.)	librarian@kenedy.lib.tx.us		
f	Holiday/vacation/summer contact information:			

Block 2: Minor Modification to Existing Contract?

- 7 ☐ Check if this Form 471 represents a minor modification, such as a modification of services, to a Form 471 for which you already have a Receipt Acknowledgement Letter. Provide the data requested below, attach a Description of Services highlighting the modified service, and sign Block 6.

Form 471 Application #:

Funding Request Number:

Minor modification requests can be filed MANUALLY only. Please see www.sl.universalservice.org for filing instructions.

Entity Number	197702	Applicant's Form Identifier	003
Contact Person	Sylvia Pena	Phone Number	830-583-3313

Block 3: Impact of Services Ordered in THIS Application

8 Please provide your best estimate of the number of people who will be served by all of the services ordered in THIS Form 471. Schools/school districts complete 8a. Libraries complete 8b. Consortia complete 8a and/or 8b.

a Number of students to be served **b** Number of library patrons to be served

9 The following questions seek summary outcome information based on the services ordered in this Form 471 application. Please complete only those rows that are relevant to THIS application.

IF THIS APPLICATION INCLUDES...		BEFORE ORDER	AFTER ORDER
a	(Schools/districts/consortia only) Telephone service: How many classrooms had phone service before and after your order?	N / A	--
b	High-bandwidth voice/data/video service: How many buildings served before and after your order?	--	--
c	High-bandwidth voice/data/video service: Highest speed to a building before and after your order?	--	--
d	Dial-up Internet connections: How many before and after your order?	0	--
e	Dial-up Internet connections: Highest speed before and after your order?	--	--
f	Direct connections to the Internet: How many before and after your order?	1	1
g	Direct connections to the Internet: Highest speed before and after your order?	128kbps	128kbps
h	Internet access (for schools): How many rooms have Internet access before and after your order?	N / A	--
i	Internet access (for libraries): How many buildings have Internet access before and after your order?	1	1
j	Internet access: How many computers (or other devices) with Internet access before and after your order?	4	4
k	Other technology outcomes: (please specify):	--	--

Block 4: Discount Calculation Worksheets (pages 3a, 3b, and 3c)

The following 3 pages (3a, 3b, and 3c) are Block 4 worksheets for use in calculating your discount for services. You will complete one or more depending on the type of application you are filing. Each worksheet has instructions.

- If you are filing as a school or a school district, use Worksheet A (page 3a).
- If you are filing as a library (i.e. outlet/branch, system), use Worksheet B (page 3b).
- If you are filing as a consortium, use Worksheet C (page 3c), and include as many Worksheets A and B as you need for back-up documentation.

Entity Number <u>197702</u>	Applicant's Form Identifier <u>003</u>
Contact Person <u>Sylvia Pena</u>	Phone Number <u>830-583-3313</u>

Block 4: Discount Calculation Worksheet C for Consortia

Worksheet #C- _____

Page 2 of 2



(For Administrator's Use)

Instructions: If you are filing a Consortium application, use this worksheet to calculate the consortium discount rate based on eligible members' discounts. Provide Worksheets A and/or B for back-up documentation.

10a If you are:

- **Applying for discounts ONLY on site-specific services:**
Complete columns 1-4 only. Add and number pages as needed.
- **Applying for discounts on services shared by ALL members (with or without site-specific services as well):**
Complete columns 1-4 PLUS 10c, below.
- **Applying for discounts on different shared services shared by different groups of consortium members:**
Complete one worksheet, columns 1-4 PLUS 10c, for EACH different group of entities sharing a service. Designate this worksheet C-1, C-2, C-3, etc.

10b List entities and calculate discount(s).

1	2	3	4
ELIGIBLE MEMBER ENTITIES Name of each school, school district and/or library (i.e. outlet/branch, system) in consortium	ENTITY NUMBER For each entity listed in Column 1		ENTITY DISCOUNT School: Discount from Worksheet A, Column 7 School District: Weighted Average Discount from Worksheet A, Item 10c Library System: Discount from Worksheet B, Item 10c
Kenedy Public Library	197702		80%
Totals for calculating Shared Discount			

10c Shared Discount %

(Col. 4 total divided by # of entities in Col. 1. Round to nearest %)



80%

Entity Number <u>197702</u>	Applicant's Form Identifier <u>003</u>
Contact Person <u>Sylvia Pena</u>	Phone Number <u>830-583-3313</u>

Block 4: Discount Calculation Worksheet B For Libraries

Worksheet #B-_____

Page 1 of 2

Instructions: If you are filing a library application, use this worksheet to calculate the discount rate(s) for outlets/branches and systems.

(For Administrator's Use)

10a If you are:

- **Applying for discounts ONLY for one outlet/branch or ONLY for site-specific services:**
Complete columns 1-5 only for each outlet/branch. Add and number pages as needed.
- **Applying for discounts on services shared by ALL outlets/branches in the library system (with or without site-specific services as well):**
Complete columns 1-5 PLUS 10c below.
- **Applying for discounts on different shared services that are shared by different groups of outlets/branches:**
Complete one worksheet, columns 1-5 PLUS 10c, for EACH different group of outlets/branches sharing a service. Designate this worksheet B-1, B-2, B-3, etc.

10b List entities and calculate discount(s).

Library System Name: _____

Library System Entity Number: _____

1 Name of Eligible Library (outlet/branch)	2 Entity Number (1-10 digits)	3	4 Name of School District in which outlet/branch in Column 1 is located	5 Weighted Average Discount for the School District in Column 4 (round to nearest %)
Kenedy Public Library	197702		Kenedy ISD	80%
Totals for calculating Shared Discount				80%
10c Shared Discount % (Col. 5 total divided by # of outlets/branches in Col. 1. Round to nearest %)				<div style="display: flex; align-items: center; justify-content: center;"> <div style="width: 100px; border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="font-size: 2em;">→</div> </div>

Entity Number <u>197702</u>	Applicant's Form Identifier <u>003</u>
Contact Person <u>Sylvia Pena</u>	Phone Number <u>830-583-3313</u>

Block 5: Discount Funding Request(s)

Block 5, page 1 of 2

Instructions: Use one Block 5 page for **EACH** service (Funding Request Number) for which you are requesting discounts.

Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly.

ERN # [REDACTED] (to be assigned by administrator)

11 Category of Service (only ONE category should be checked) <input type="radio"/> Telecommunications Service <input checked="" type="radio"/> Internet Access <input type="radio"/> Internal Connections	15 Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions) T
12 Form 470 Application Number (15 digits) <u>841140000327110</u>	16 Billing Account Number (e.g., billed telephone number) <u>830-583-3313</u>
13 SPIN - Service Provider Identification Number (9 digits) <u>143004662</u>	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) <u>01/08/2001</u>
14 Service Provider Name <u>Southwestern Bell Telephone</u>	18 Contract Award Date (mm/dd/yyyy) <u>--</u>
	19a Service Start Date (mm/dd/yyyy) <u>07/01/2001</u>
	19b Service End Date (mm/dd/yyyy) (use only for "T" or "MTM" services) <u>06/30/2002</u>
21 Description of This Service: You MUST attach a description of the service, including a breakdown of components and costs, plus any relevant brand names. Label this description with an Attachment #, and note number in space provided below. Attachment # <u>1</u>	20 Contract Expiration Date (mm/dd/yyyy) <u>06/30/2002</u>
22 Entity/Entities Receiving This Service: a. If the service is site-specific (provided to one site and not shared by others), list the Entity Number of the entity from Block 4 receiving this service : <u>197702</u> b. If the service is shared by all entities on a Block 4 worksheet, list the worksheet number (e.g., A-1): _____	

23 Calculations										
Recurring Charges					Non-Recurring Charges			Total Charges		
A	B	C	D	E	F	G	H	I	J	K
Monthly \$ charges (total amount per month for service)	How much of the \$ amount in (A) is ineligible?	Eligible monthly pre-discount amount (A minus B)	# of months service provided in program year	Annual pre-discount \$ amount for eligible recurring charges (C x D)	Annual non-recurring (one-time) \$ charges	How much of the \$ amount in (F) is ineligible?	Annual eligible pre-discount \$ amount for one-time charges (F minus G)	Total program year pre-discount \$ amount (E + H)	% discount (from Block 4 Worksheet)	Funding Commitment \$ Request (I x J)
145.00	0	145.00	12	1,740.00	0	0	0	1,740.00		

Entity Number <u>197702</u>	Applicant's Form Identifier <u>003</u>
Contact Person <u>Sylvia Pena</u>	Phone Number <u>830-583-3313</u>

Block 5: Discount Funding Request(s)

Block 5, page 2 of 2

Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts.

Make as many copies of this page as necessary, and number the completed pages to assure that they are all processed correctly.

FRN# (to be assigned by administrator)

11 Category of Service (only ONE category should be checked) <input type="radio"/> Telecommunications Service <input checked="" type="radio"/> Internet Access <input type="radio"/> Internal Connections	15 Contract Number (if available; use "T" if tariffed services, "MTM" if month-to-month services as described in Instructions) <u>KPL 1999</u>																																												
12 Form 470 Application Number (15 digits) <u>952610000327167</u>	16 Billing Account Number (e.g., billed telephone number) <u>210-444-0887-668-5</u>																																												
13 SPIN - Service Provider Identification Number (9 digits) <u>143004611</u>	17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing) <u>01/08/2001</u>																																												
14 Service Provider Name <u>Southwestern Bell Internet</u>	18 Contract Award Date (mm/dd/yyyy) <u>--</u>																																												
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Do not write in this area

Entity Number 197702 Applicant's Form Identifier 003
Contact Person Sylvia Pena Phone Number 830-583-3313

Block 6: Certifications and Signature

- 24 The entities listed in Block 4 of this application are eligible for support because they are: (Check one or both.)
- a ☐ schools under the statutory definitions of elementary and secondary schools found in the Elementary and Secondary Education Act of 1965, 20 U.S.C. Secs. 8801(14) and (25), that do not operate as for-profit businesses and do not have endowments exceeding \$50 million; and/or
 - b ☒ libraries or library consortia eligible for assistance from a State library administrative agency under the Library Services and Technology Act of 1996 that do not operate as for-profit businesses and whose budgets are completely separate from any schools, including, but not limited to, elementary and secondary schools, colleges, or universities.
- 25 The eligible schools and libraries listed in Block 4 of this application have secured access to all of the resources, including computers, training, software, maintenance, and electrical connections necessary to make effective use of the services purchased as well as to pay the discounted charges for eligible services.
- 26 All of the schools and libraries or library consortia listed in Block 4 of this application are covered by:
- a ☒ an individual technology plan for using the services requested in this application; and/or
 - b ☐ higher-level technology plan(s) for using the services requested in this application; or
 - c ☐ no technology plan needed; applying for basic local and long distance telephone service only.
- 27 Status of technology plans (if representing multiple entities with mixed technology plan status, check both a and b):
- a ☒ technology plan(s) has/have been approved; and/or
 - b ☐ technology plan(s) will be approved by a state or other authorized body; or
 - c ☐ no technology plan needed; applying for basic local and long distance telephone service only.
- 28 I certify that the entities eligible for support that I am representing have complied with all applicable state and local laws regarding procurement of services for which support is being sought.
- 29 I certify that the services the applicant purchases at discounts provided by 47 U.S.C. Sec. 254 will be used solely for educational purposes and will not be sold, resold, or transferred in consideration for money or any other thing of value.
- 30 I certify that the entity(ies) I represent has complied with all program rules and I acknowledge that failure to do so may result in denial of discount funding and/or cancellation of funding commitments.
- 31 I understand that the discount level used for shared services is conditional, for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as sharing in the service, receive an appropriate share of benefits from those services.
- 32 I recognize that I may be audited pursuant to this application. I will retain for five years any and all worksheets and other records that I rely upon to fill out this application, and, if audited, will make available to the Administrator such records.
- 33 I certify that I am authorized to submit this request on behalf of the above-named entities, that I have examined this request, and to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

34 Signature of authorized person Sylvia Pena 35 Date 01/16/01

36 Printed name of authorized person Sylvia Pena

37 Title or position of authorized person Library Director

38 Telephone number of authorized person: (830) 583-3313, ext. ----

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

The Americans with Disabilities Act, the Individuals with Disabilities Education Act and the Rehabilitation Act may impose obligations on entities to make the services purchased with these discounts accessible to and usable by people with disabilities.

Entity Number	197702	Applicant's Form Identifier	003
Contact Person	Sylvia Pena	Phone Number	830-583-3313

NOTICE TO INDIVIDUALS: Section 54.504 of the Federal Communications Commission's rules requires all schools and libraries ordering services that are eligible for and seeking universal service discounts to file this Services Ordered and Certification Form (FCC Form 471) with the Universal Service Administrator, 47 C.F.R. § 54.504. The collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended, 47 U.S.C. § 254. The data in the report will be used to ensure that schools and libraries comply with the competitive bidding requirement contained in 47 C.F.R. § 54.504. All schools and libraries planning to order service eligible for universal service discounts must file this form themselves or as part of a consortium.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or a potential violation of a FCC statute, regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government is a party of a proceeding before the body or has an interest in the proceeding.

If you owe a past due debt to the Federal government, the taxpayer identification number (such as your social security number) and other information you provide may also be disclosed to the Department of the Treasury Financial Management Service, other Federal agencies and/or your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide the information to these agencies through the matching of computer records when authorized.

If you do not provide the information we request on the form, the FCC may delay processing of your application or may return your application without action.

The foregoing Notice is required by the Privacy Act of 1974, Pub. L. No. 93-579, December 31, 1974, 5 U.S.C. § 552, and the Paperwork Reduction Act of 1995, Pub. L. No. 104-13, 44 U.S.C. § 3501, et seq.

Public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing, and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the reporting burden to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, DC 20554.

Please submit this form to:

**SLD-Form 471
P.O. Box 7026
Lawrence, Kansas 66044-7026**

For express delivery services or U.S. Postal Service, Return Receipt Requested, mail this form to:

**SLD-Form 471
c/o Ms. Smith
3833 Greenway Drive
Lawrence, Kansas 66046
(888) 203-8100**

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

SLD FORM 471
% MS SMITH
3833 GREENWAY DR.
LAWRENCE, KANSAS 66046

2. Article Number (Copy from service label)

ET 8822316 US

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

X

Jan. 17, 01

☐ Agent☐ AddresseeD. Is delivery address different from item 1?
If YES, enter delivery address below:☐ Yes☐ No

3. Service Type

☐ Certified Mail☒ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

24. ☒ I certify that I am authorized to submit this request on behalf of the above-named entities, that I have examined this request, and to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

25. Signature of authorized person	<i>Sylvia Pena</i>	26. Date	<i>12/11/00</i>
27. Printed name of authorized person	Sylvia Pena		
28. Title or position of authorized person	Library Director		
29. Telephone Number	(830) 583-3313		

Form 470 Application Number: 952610000327167

KENEDY PUBLIC LIBRARY

303 W MAIN ST

KENEDY, TX 78119-

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

NOTICE TO INDIVIDUALS: Section 54.504 of the Federal Communications Commission's rules requires all schools and libraries ordering services that are eligible for and seeking universal service discounts to file this Description of Services Requested and Certification Form (FCC Form 470) with the Universal Service Administrator, themselves or as part of a consortium. 47 C.F.R. § 54.504. The collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended, 47 U.S.C. § 254. The data in the report will be used to ensure that schools and libraries comply with the competitive bidding requirement contained in 47 C.F.R. § 54.504. All schools and libraries planning to order services eligible for universal service discounts must file this form themselves or as part of a consortium.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or potential violation of a FCC statute, regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party of a proceeding before the body or has an interest in the proceeding.

If you owe a past due debt to the federal government, the taxpayer identification number (such as your social security number) and other information you provide may also be disclosed to the Department of the Treasury Financial Management Service, other Federal agencies and/or your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide this information to these agencies through the matching of computer records when authorized.

If you do not provide the information we request on the form, the FCC may delay processing of your application or may return your application without action.

The foregoing Notice is required by the Privacy Act of 1974, Pub. L. No. 93-579, December 31, 1974, 5 U.S.C. § 552, and the Paperwork Reduction Act of 1995, Pub. L. No. 104-13, 44 U.S.C. § 3501, et seq.

Public reporting burden for this collection of information is estimated to average 6 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing, and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the reporting burden to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, D.C. 20554.

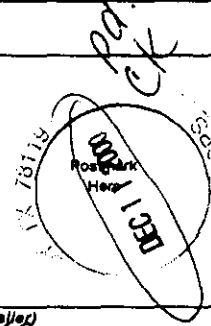
Please submit this form to:

SLD - Form 470
P.O. Box 7026
Lawrence, KS 66044-7026
1-888-203-8100

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Article Sent To:

Postage	\$
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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 2.98



Name (Please Print Clearly) (To be completed by mailer)

SLO Form 470
c/o Mrs. Smith
City, State, ZIP+4® Lawrence KS 66044

PS Form 3800, July 1999

See Reverse for Instructions

Form
470
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Certified receipt
Dec. 11, 2000